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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee					Office Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		Example: If typing, type over the lines.		12FE4M5			
CUNA Mutual Holding	Company Politic	al Action C	Committee	(CUNA	Mutual PA	.C)		
ADDRESS (number and street)	5910 Mineral Point Rd, PO Box 747							
Check if different	Mail Stop 5910 4 A2							
than previously reported. (ACC)	Madison	Madison			WI 53701-0747			
2. FEC IDENTIFICATION N	UMBER ▼	CITY 🛦			STATE A	ZIP COD	E	
C C00402107		3. IS THIS REPORT	× (N	EW I) OR	AM (A)	ENDED		
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		ay 20 (M5)			Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)	
(a) Quarterly Reports:		Mar 20 (M3)		un 20 (M6)			(Non-Election Year Only)	
X April 15 Quarterly Report (0	D1)	Apr 20 (M4)	Ju	ul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)	
July 15 Quarterly Report (0	PRE-Electi		Primary (12P)	L	General (Runoff (12R)	
October 15 Quarterly Report (0	Report for	the:	Convention (1	2C)	Special (1	12S)		
January 31 Year-End Report (\	/E)	Election on	M M /	D D /	Y Y Y Y Y	in the State of		
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Elect Report for		General (30G)		Runoff (3	0R) §	Special (30S)	
Termination Report (TER)		Election on	M = M /	D D /	Y I Y I Y I Y	in the State of		
5. Covering Period 01 01 2012 through 03 31 2012								
I certify that I have examined the	nis Report and to the b	est of my know	wledge and be	elief it is tru	e, correct and	l complete.		
Type or Print Name of Treasure	Christopher P. Roe							
Signature of Treasurer Chri.	stopher P. Roe		[Electronically	Filed] D	ate 04	/ 0 0 / 10	2012	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.								
Office Use Only						FEC FORM Rev. 12/200		